



**COMMONWEALTH OF MASSACHUSETTS**  
**Office of Consumer Affairs and Business Regulation**  
**DIVISION OF INSURANCE**

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**Domestic Insurance Company Mailing Address Change Instructions**

A Massachusetts domestic insurance company that changes its **mailing address must** provide the following:

1. Written notification of the address change, including the old address and the new address
2. The effective date of the address change
3. There is no fee for this filing

Please forward these items to:

Commonwealth of Massachusetts  
Division of Insurance  
Company Licensing Section  
One South Station  
Boston, MA 02110-2208